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ABSTRACT

In an attempt to deal with teenage pregnancy, the Owensboro, Kentucky, City School System operated the Teenage Parent Program, an inner-city program for pregnant teenagers from all schools in Daviess County. A "Coping Skills Project" was designed to enhance this program by improving parenting attitudes and skills, increasing career awareness, and providing a proper single-parent role model to interact with these teenagers. During the project, assessment instruments were revised, and a videocassette recorder and cassette tapes were purchased. Teachers taped and edited public and educational television programs and used them to teach parenting skills and attitudes at much lower cost than purchasing commercial products. A teacher's aide who was a single parent was hired to interact with the students individually, in small groups, and in the classroom. As a result of the project, scores on parenting attitudes tests, career awareness tests, and parenting skills tests improved, though some students were not in the project long enough to be measured on all outcomes. The project was judged a success and was scheduled to continue, with revisions, for the next year. (Report includes a list of videocassette titles and sample crossword puzzles.) (KC)

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ED308348

Annual Report - FY 87

Teenage Parent Coping Skills

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Teenage Parent Program
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I. PROGRAM SYNOPSIS

In an attempt to deal with the dilemma of teenage pregnancy since August, 1961, the Owensboro City School System has operated the Teenage Parent Program, an inner-city program for pregnant teenagers from all public and parochial schools within Daviess County. This is housed in two classrooms and an office in a building adjacent to Owensboro High School. Students who so choose ordinarily transfer from all public and parochial schools within Daviess County to the Teenage Parent Program, usually referred to as TAP, at about five months into pregnancy and remain enrolled through the convalescent period after birth of the baby. At this time they return to their home schools. Since expected dates of delivery vary with individuals, enrollment periods vary. This, along with the fact that youngsters may move out of the school district or may drop out at times, creates an extremely fluid enrollment. It fluctuates from some eight to seventeen youngsters of all ability levels in grades 7-12 often from as many as seven different schools. TAP has become multi-functional in that it: (a) until the birth of the baby, offers a full-time in-school day program in which students can earn high school credits in the four basic academic areas as well as one credit in the home economics-related parenting career awareness course, and (b) during the four-to-six-week convalescent period after childbirth, provides instruction in the home to facilitate a smoother transition from TAP back to regular school at this point. Adequate staffing to provide in-home instruction was becoming questionable.

This project was designed to and has enhanced the existing endeavor by: (a) improving parenting attitudes and skills, (b) increasing career awareness, and (c) providing a proper single-parent role model to interact with these youngsters most of whom routinely lack this element in their lives.

II. ACTIVITIES AND ACHIEVEMENTS

The "Coping Skills Project" has produced more capable teen mothers who will be more likely to finish their educations and join the labor force. Some objectives having to do with project administration and impacting significantly upon continuation and expansion activities were:

A. To revise assessment instruments. These were redesigned to align them with staff goals. The entire assessment process was reorganized for better efficiency.

B. To purchase supplies. $419 was spent to purchase a videocassette recorder and blank videocassette tapes. Some additional blank tapes were purchased with other funds. These have been used to enhance the curriculum. Ninety-six hours of educational programs appropriate to the curriculum have been taped from public and educational television. A commercial, sixty-minute videotape averages $165. It is not uncommon to find in commercial tapes at least some concepts not truly relevant to the subject as it is presently being taught with one particular group. However, in this case, materials have been carefully edited, and only totally appropriate information has been retained for use in the program. Using commercial prices as a guideline we taped approximately $2,640 worth of videotapes all of which are relevant to our teaching. The actual cost of these materials to us was $369. for a

videocassette recorder and $72 for videotapes. This equipment allowed our students to view an average of three hours of very suitable programs per week this year as compared with an average of a half hour of viewing last year and even less in previous years.

C. To interview and hire a teacher aide who would serve as a role model for students just with her presence as she interacted with them — it was originally planned — for an average of 30 minutes each per week.

Through a thorough selection process a person was hired who: (1) had been a never-married parent for six years, (2) had worked through a number of jobs with each move an effort toward improvement, (3) after extensive dating relationships was planning and did marry in the very near future, and (4) expressed concern for and a desire to work in the capacity outlined with youngsters who were now facing the problems she had encountered.

Due to a number of factors, the original objective of spending an average of 30 minutes per week individually with each student was found infeasible: (a) students are involved in formal classes 25-30 hours per week leaving only 4½ - 9½ hours of breaks, lunches, and study halls when they would be accessible, and (b) pregnant youngsters tend to be absent from school more often than others, thus decreasing their exposure to her.

Realization of these factors led to a restructuring of her work assignment. A major focus of this project was as much exposure as possible for all of these soon-to-become single parents to a wholesome role model. The teacher aide began sitting in on two of the vocational classes as a consultant sharing per personal experiences as a means of enhancing teacher presentations in the areas of parenting skills and career awareness/ orientation to the world of work. She continued the effort to spend as much time as possible with them individually during the remaining sporadic portions of the day when she and they were available to each other. This change in work assignment led to modification of this objective's evaluation. Rather than just measuring time spent with students individually, it became evident that her time spent with them also in small groups of two to three as well as in a large group (classroom) setting were worth consideration.

Upon instituting this shift in teacher aide-student interaction, these teen parents-to-be were found to have been involved in counseling with the teacher aide/single parent/role model a weekly average of: (a) 19.75 minutes individually, (b) 5 minutes in small groups of two to three, and (c) eight hours per week in a large group (classroom setting). Thus, these single parents-to-be were now being afforded the opportunity to directly interact with an appropriate role model a total weekly average of nearly 8½ hours.

Three objectives had to do with continuation and expansion strategies:

(a) Students would demonstrate raised assessment scores in parenting attitudes an average of one level of a possible five levels on the Performance and Attitudinal Scale (see Appendix A) for 70% of students on pre- and post-tests. At the close of the school year,

61% of students were found to have raised scores one or more levels individually. Since some scores improved significantly and some marginally, an entire group average was calculated and the findings showed that students enrolled in the day program for a significant period — at least six weeks — improved parenting attitudes 1.02 levels.

The Parenting Attitudes Inventories (Appendixes B-C, H-T) are staff-devised, -assessed, and-keyed to the Performance and Attitudinal Scale-Part I (Appendix A) which consists of eleven traits having five levels each.

(b) Assessment scores in career awareness would increase an average of one level for 70% of students on pre- and post-tests.

Twenty-one students participated in the Teenage Parent Program for six weeks or longer during the 1986-87 school year. Of the twenty-one, five missed the evaluation stage of the career orientation module due to: (a) unexpected moving to another school district, (b) unexpected withdrawing from school, or (c) enrolling extremely late in the school year. Due to a scheduling conflict, four students were unable to take advantage of the career orientation module. Of the remaining students — ones enrolled long enough to complete the module — 91.6% raised assessment scores an average of one or more levels. Even if all students enrolled in TAP for more than the last six weeks — career awareness non-participants as well as participants — had been included in the tally, they would have shown an average gain of .9 level. As with parenting attitude evaluation some students' scores improved minimally and some dramatically. Therefore, calculation of a group average for those able to participate yielded an average 1.5 levels' increase of a possible five levels in career awareness. Staff-devised instruments (Appendixes C-G) are keyed to the "Career Awareness"--Part II of Coping Skills Performance and Attitudinal Standards (Appendix A) which consists of seven traits having five levels each. Viewed from nearly every perspective, it is clearly evident that an appreciable number of youngsters in critical need of an awareness of the world of work received just that.

(c) Students would improve scores in specific parenting skills an average of 45% on pre- and post-tests. In spite of the extraordinarily fluid enrollment described in the synopsis, evaluation of parenting skills based on scores of students who were enrolled for testing of each skill showed a 62% gain. This data is derived from pre- and post-tests on classroom units taught. (Appendixes H-T).

III. RESULTS, RECOMMENDATIONS ON FINDINGS, AND USE OF MATERIALS

The achievement outlined in the previous section would lead one to the definite conclusion — as the TAP staff perceives it — that each goal was met and three were notably surpassed. It is clearly evident that the project ameliorated the approach to the future for these youngsters who became single parents while participating.

It is recommended that teacher aide-student interaction time be evaluated in terms of number of days students are present. Obviously, if a student is absent she cannot have time with the teacher aide for counseling.

A more conscious effort will be made to schedule the career awareness module during the portion of the school day which would present least conflict in schedules and allow for greatest student participation possible.

One additional amendment to the project is the introduction of some type of additional incentive for students to thoroughly complete parenting skills and career awareness units of study.

Parenting skills instruction for these unique students is based upon selected modules from the Kentucky Vocational Home Economics Department. Section IV contains the following materials developed by the staff to enrich the modules: (a) puzzles labeled according to specific module to which each applies, (b) a listing of videocassette short subjects taped from public and educational television according to specific state home economics modules to which each tape is applicable.

Ninety percent of these audiovisual aides has been added this year with the purchase of a videocassette recorder and blank videocassette tapes. The parenting skills teacher taped and edited current programs from public and educational television. Another possibly useful piece of material found in the final section is a copy of a letter written by the teacher aide — who had walked in the often uncomfortable shoes of a single parent for six years — to a young pregnant girl not yet in TAP who was still in the process of deciding what to do about her baby. It was learned later that the letter had a dramatic influence upon this youngster; therefore, it is the staff's opinion that there are a number of school settings and counseling settings, in general, in which this could be a useful tool.

One final product evolving from the project was an amateur videotape of a panel discussion presented during the semiannual Mother-Daughter Luncheon. The panel, whose topic was "The Trials and Tribulations of Teen Parenting," consisted of three former students — one in an unhappy marriage, one single, one in the process of divorce — and the divorcee's mother. School system administration has previewed numerous commercially prepared video programs on the subject but feels that this amateur one may be as dynamic with local adolescents as anything else available. Plans are underway to secure permission from the panelists to use a carefully edited version of the tape in a broadly restructured sex education program in the school system next year. It would seem that it could find a similar purpose in other school systems or youth-oriented settings. The videotapes themselves are not included in the report, but they could be made available upon request.

After concluding this report which forces personnel to reflect upon failures as well as accomplishments, this project is seen as a truly worthwhile endeavor. The staff looks forward to another year with a fresh approach to a project which hopefully will continue to redirect the lives of extremely troubled teenagers, as well as those of their families and their young offspring.

MATERIALS/PRODUCTS

Module-Related VCR Short Subjects

HD-33 Selecting and Caring for a Layette
VCR - "Baby's Laundry"
"New Nursery Items"

HD-34 Bathing and Dressing an Infant
VCR - American Baby Show "Bathing"

HD-37 Feeding the Infant
Puzzle
VCR - "Breast Feeding"
"Feeding Infant"
"Ideas for Solid Foods"

HD-38 Providing Appropriate Infant Stimulation
Puzzle
VCR - "Infant Massage" "Kids and TV"
"Choosing Toys" "Activities for Toddlers"
"Infant Stimulation" "Parent Child Play"

HD-43 Selecting Child Care Services
VCR - "Infections in Day Care"
"Child Care Alternatives"
"Working and Day Care"

HD-6 Human Reproductive System
Puzzle
VCR - Nova "The Miracle of Life"
"My Mom's Having a Baby"
"Human Animal Pt. I"

HD-7 Pregnancy
Puzzle
VCR - "My Mom's Having a Baby" "Smoking and the Fetus"
"Human Animal Pt. 2" "Journey to Birth"
"Born Hooked" "Miracle of Life"
"Alcohol Crisis for Unborn"
"Healthy Babies-The Genetic Era"
"Importance of Preconception and Prenatal Care"

HD-18 Teenage Pregnancy
Puzzle - "Facts About Teen Pregnancy"
VCR - "Teenage Parents Looking for Love"
"Teenage Father" (After School Special)
"Generation at Risk"
"Can a Boy Say No?"
"Adoption"
"Daddy"
"Choices"
"Vanishing Family"
"Love Lives On"

HD-31 Labor and Delivery
Puzzles (2)
VCR - "Joy of Natural Childbirth"
"Birthing Centers"
"Types of Deliveries"
"Lamaze"
"New Childbirth Tech."
"Having Babies Pt. I and Pt. II"

HD-32 Postpartum Care
VCR - "First the Egg"
"Circumcision"
"Beating the Baby Blues"
"Intensive Care"
"Neonatal Intensive Care"
"High Tech. Babies"
"Caring for Your Newborn"
"Sex After Pregnancy"
"Bonding and Love"

HD-D-02 Spouse Abuse
VCR - "Burning Bed"

HD-S-01 Rape
VCR - "Date Rape" (Hour Magazine)

First Year of Life
"The Newborn"
"Journey Through the First Year of Life"
"Feet and Shoes"
"Emotional Development in Young Children"
"What to Tell Your Baby Sitter"
"Aquatots"
"Ideas for Parents"
"The Gifted Child"
"New Baby Products"
"The Growing Years Series"

HD-S-05 Child Sexual Abuse
VCR - "Child's Cry" (Movie)
"Something About Amelia"
"Don't Touch" (After-School Special)
"One Terrific Guy"

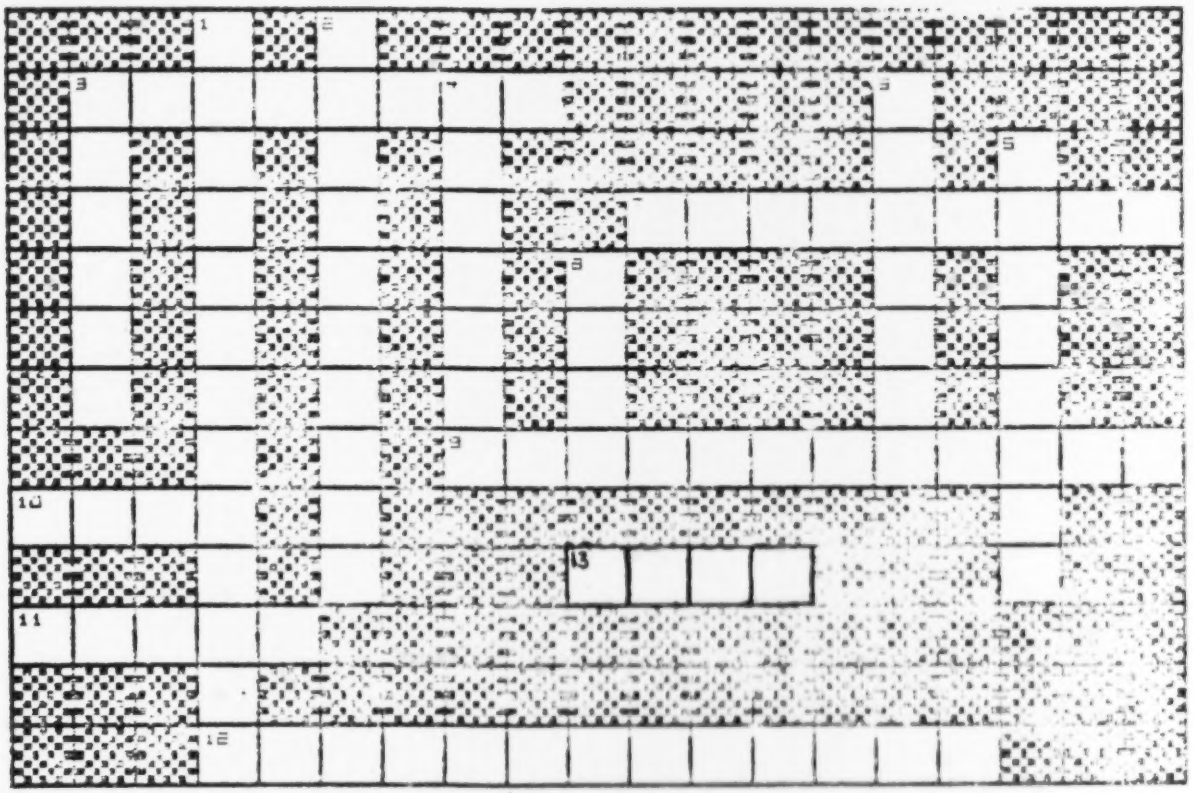
Related Subjects

"Out of Step"	"Men, Women, Sex and Aids"
"Loving Relationships"	"Working Parent"
"To Keep Your Child Alive"	"Aids"
"Nutrition"	"When Sex Can Kill You"
"Herpes"	"Babyproofing Your Home"

World of Work
VCR - Love Mary
"Beauty Make-Overs"
"Getting Ready for the World of Work"
"Color Me Beautiful"

HO-37 NAME:_____

FEEDING THE INFANT



ACROSS CLUES

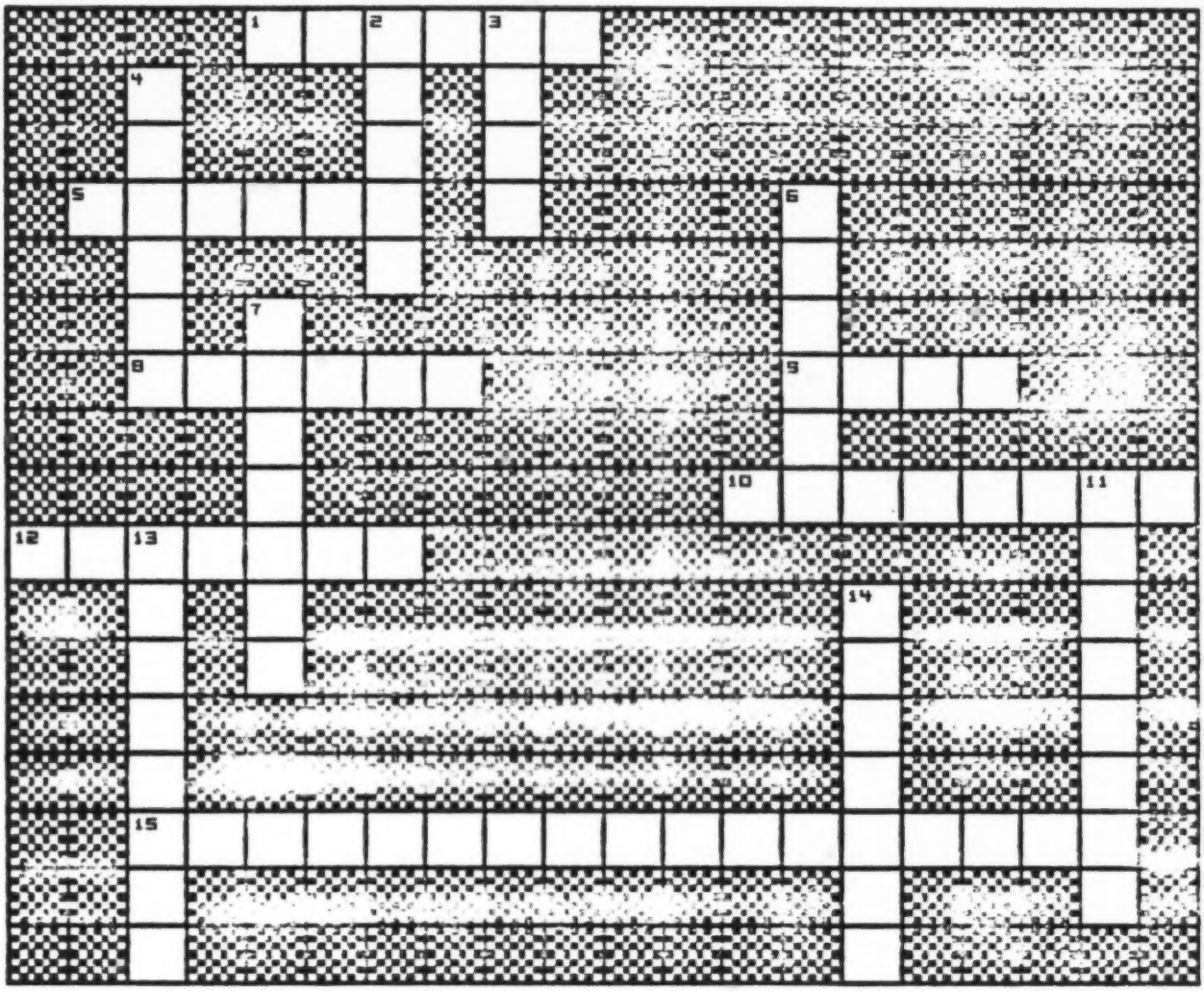
3. Sterilization process where everything is sterilized together.
7. _____ may develop if you feed solids too soon to infant.
9. Add one teaspoon of corn syrup to formula or water to relieve this condition _____.
10. Baby's first cereal.
11. Type of problem related to sharp abdominal pain.
12. Usual color of infants first Bowel Movement (two words).
13. Do this to break the gas bubble in baby's stomach.

DOWN CLUES

1. Natural method of feeding (two words).
2. Type of bottle that needs no sterilization.
3. White patches of fungus in baby's mouth.
4. Sterilization method where everything is sterilized separately.
5. Man-made diet for baby.
6. Added to supplement an infant's diet.
8. Usually added to baby's formula.

HO-38

INFANT STIMULATION



ACROSS CLUES

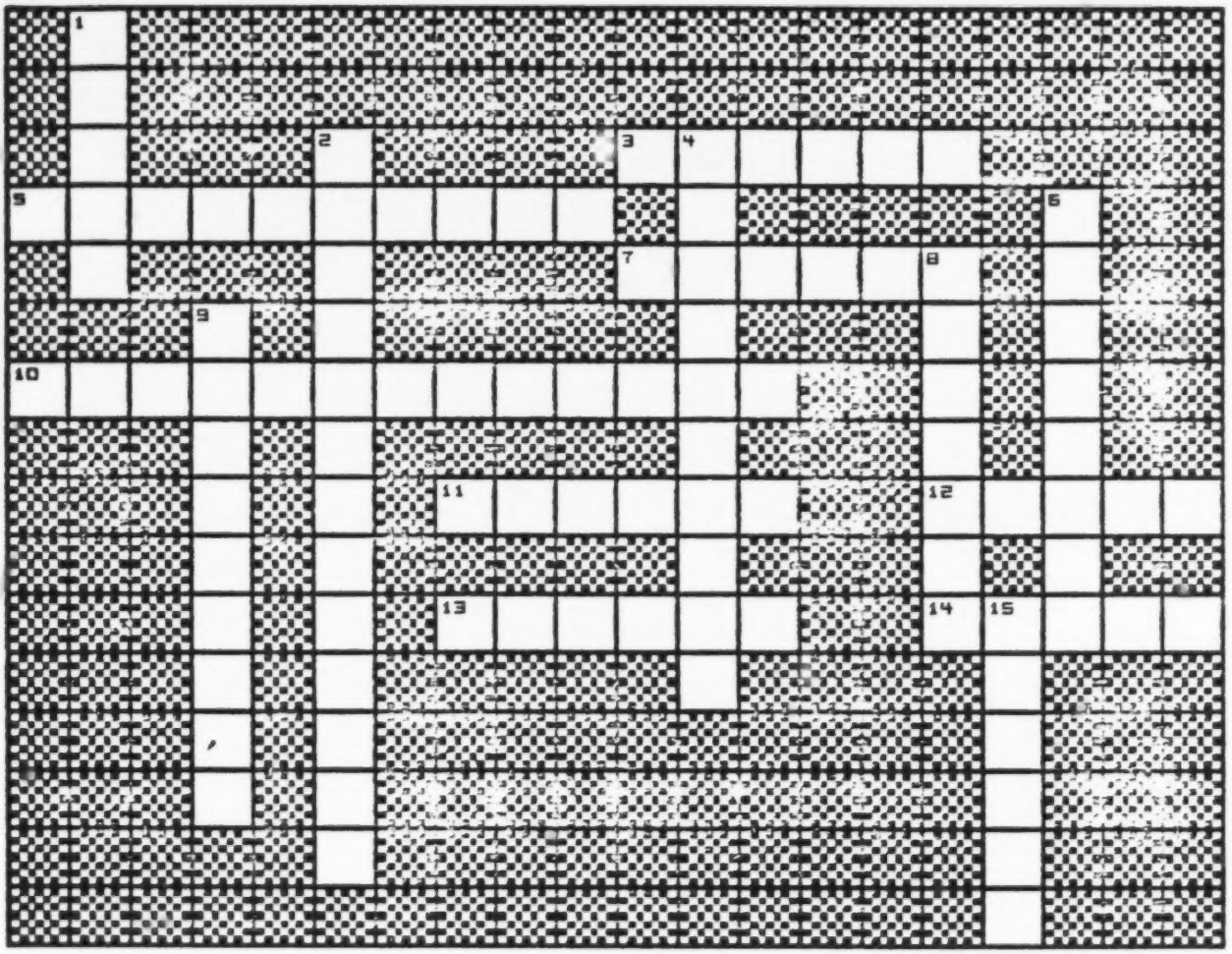
1. HANGS ABOVE THE CRIB
5. BABY
8. SENSE WHICH USES EYES
9. INFANTS LEARN AT THEIR OWN _____.
10. BABY FEELS THE TOUCH OF PARENTS ARMS HE DEVELOPS SENSE OF _____.
12. SENSE WHICH USES TONGUE
15. EARLY SENSORY DEVELOPMENT

DOWN CLUES

2. WHEN INFANT STIM. SHOULD BEGIN
3. ALL BABYS NEED _____ AND ATTENTION.
4. THROUGH WHICH A BABY LEARNS
6. ACTIVITIES SHOULD BE KEPT _____.
7. SENSE WHICH USES EARS.
11. SENSE WHICH USES THE SKIN
13. SENSE WHICH USES NOSE
14. COLORS BEST FOR BABY TO SEE

HO-7 Pregnancy

LIFE BEFORE BIRTH #1



ACROSS CLUES

3. FINE, DOWNY HAIR ON FETUS
5. MOTHER CAN FEEL MOVEMENT AT 4 MO.
7. HOME OF THE UNBORN BABY
10. LIFE LINE TO THE BABY
11. WHITE SUBSTANCE COVERING THE FETUS
12. MONTH BABY PUTS ON FAT
13. FERTILIZED EGG
14. BEGINS FUNCTIONING AT 21 DAYS

DOWN CLUES

1. YOUNG ONE, OFF-SPRING, 3 MO. TILL BIRTH
2. UNION OF EGG AND SPERM
4. PLACENTA, CORD, AND REMAINING MATERIAL
6. LIFELINE TO THE FETUS
8. MONTH OF VIABILITY
9. ABLE TO LIVE OUTSIDE THE MOM'S BODY
15. A SWELLING

HO-18

CROSSWORD PUZZLE

FACTS YOU SHOULD KNOW ABOUT
T E E N A G E P R E G N A N C Y

DOWN 7 * Some 560,000 teenage girls give D-7 each year.
ACROSS 13 * Almost one-sixth of all U.S. births are to A-13 women.
DOWN 11 * Babies born to young teen mothers have a higher risk of serious D-11 problems.

ACROSS 3 Statistics can be boring. But the A-3 on teenage pregnancy are alarming. Physical and mental birth defects affect many babies born to very young women. The high rate of teenagers having babies is a national health and social problem.that demands attention.

HEALTH RISKS TO THE TEENAGE MOTHER

The teenage mother has special problems, physically and emotionally.

ACROSS 10 * The A-10 rate from pregnancy complications is much higher among girls who give birth under age 15 than among older mothers.
ACROSS 4 * The teenage mother is more likely to be A-4 and suffer premature or prolonged labor.
DOWN 6 * During the first three months of pregnancy, seven out of ten pregnant teenagers do not see a D-6 or go to a clinic.
ACROSS 9 * Poor eating habits, smoking, A-9 and drugs increase the risk of having a baby with health problems.

HEALTH RISKS TO THE BABY

The baby growing inside a mother is in a most dependent, and often risky, place.

ACROSS 7 Low A-7 is the most immediate health problem. Babies born to teenagers often are born too small, too soon. Low-birthweight babies may have:

DOWN 2 * D-2 organ systems (brain, lungs, heart).
* Difficulty controlling body temperature & blood sugar levels
DOWN 5 * Mental D-5 .
ACROSS 2 * A risk of dying in early A-2 that is much higher than among normal babies (5½ pounds or more).

CONSEQUENCES OF TEENAGE PREGNANCY

DOWN 8 The future does not often hold great D-8 for a teenage mother and her child

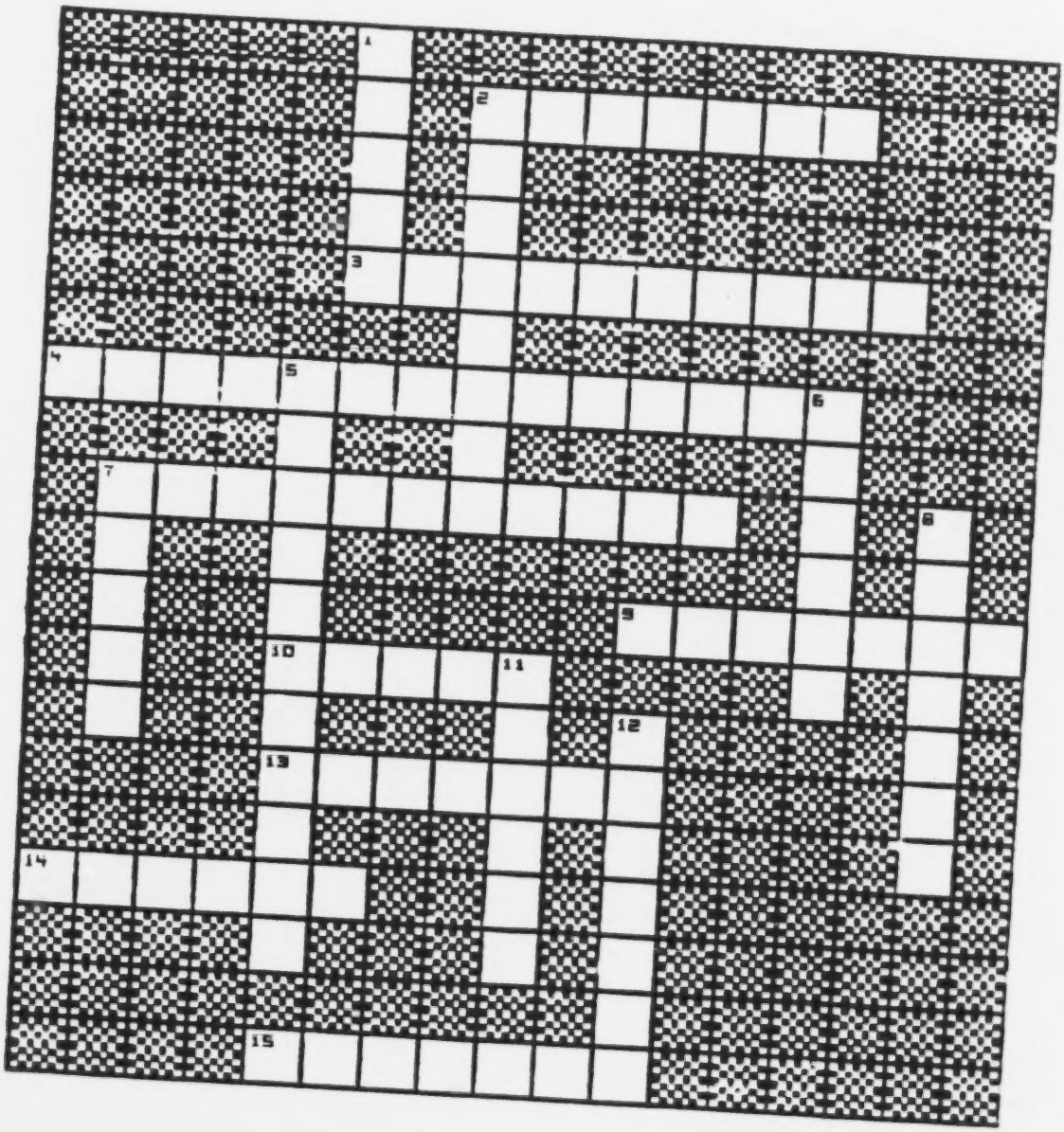
ACROSS 14 * Two out of three pregnant teenagers drop out of A-14 .
* With her education cut short, the teenage mother may lack job skills. The income of teen mothers is half of that of those who first gave birth in their 20s. The teenage mother may
DOWN 12 become financially dependent on her family or D-12 .
ACROSS 15 * Teenage marriages have a much greater chance of ending in A-15 .

If you are pregnant, you can increase your chances of having a healthy baby:

* Get regular prenatal care from your doctor or clinic.
* Eat properly
* Stop smoking, stop drinking alcohol.
DOWN 1 * Don't take any D-1 unless prescribed by your doctor.

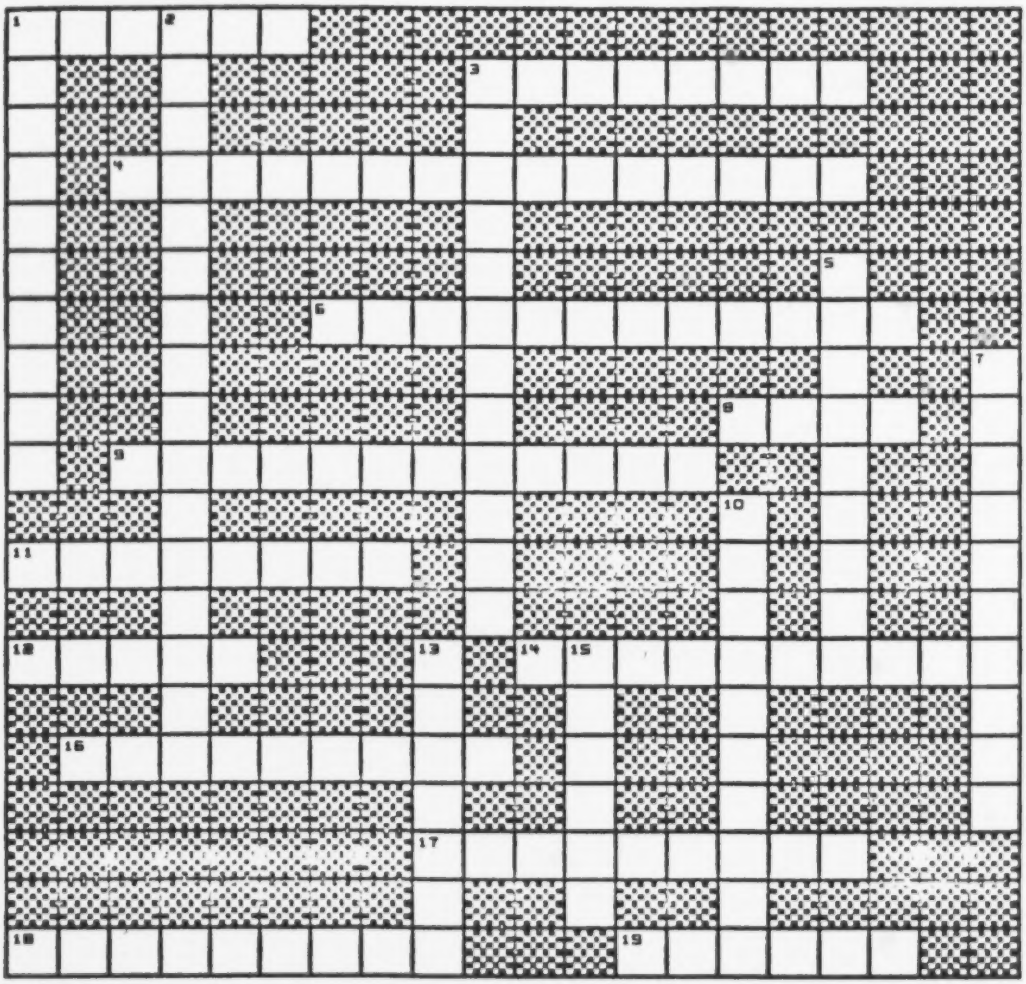
HO-18 cont'd.

TEENAGE PREGNANCY



HD-31

LABOR & DELIVERY #1



ACROSS CLUES

1. discharge of blood, mucus, & tissue after delivery
3. appearance of baby's head at the vaginal opening
4. surgical removal of the baby from the mother's uterus via the abdomen
6. electronic machine which monitors the baby's heart beat while mother is in labor
8. pink-tinged or reddish mucus which is discharged vaginally as the cervix starts to dilate
9. surgical removal of the foreskin of the penis
11. opening of the cervix of the uterus during labor
12. pinpoint white spots on baby's face resulting from immature sebaceous glands (oil ducts)
14. thinning or shortening of the cervix which must accompany dilation
16. the soft spots on the top of the baby's head
17. artificial starting of labor, usually by using hormone pitocin to make uterus contract
18. heavy plug of mucus which blocks the cervix during pregnancy
19. muscular passage way leading from the uterus to the outside world

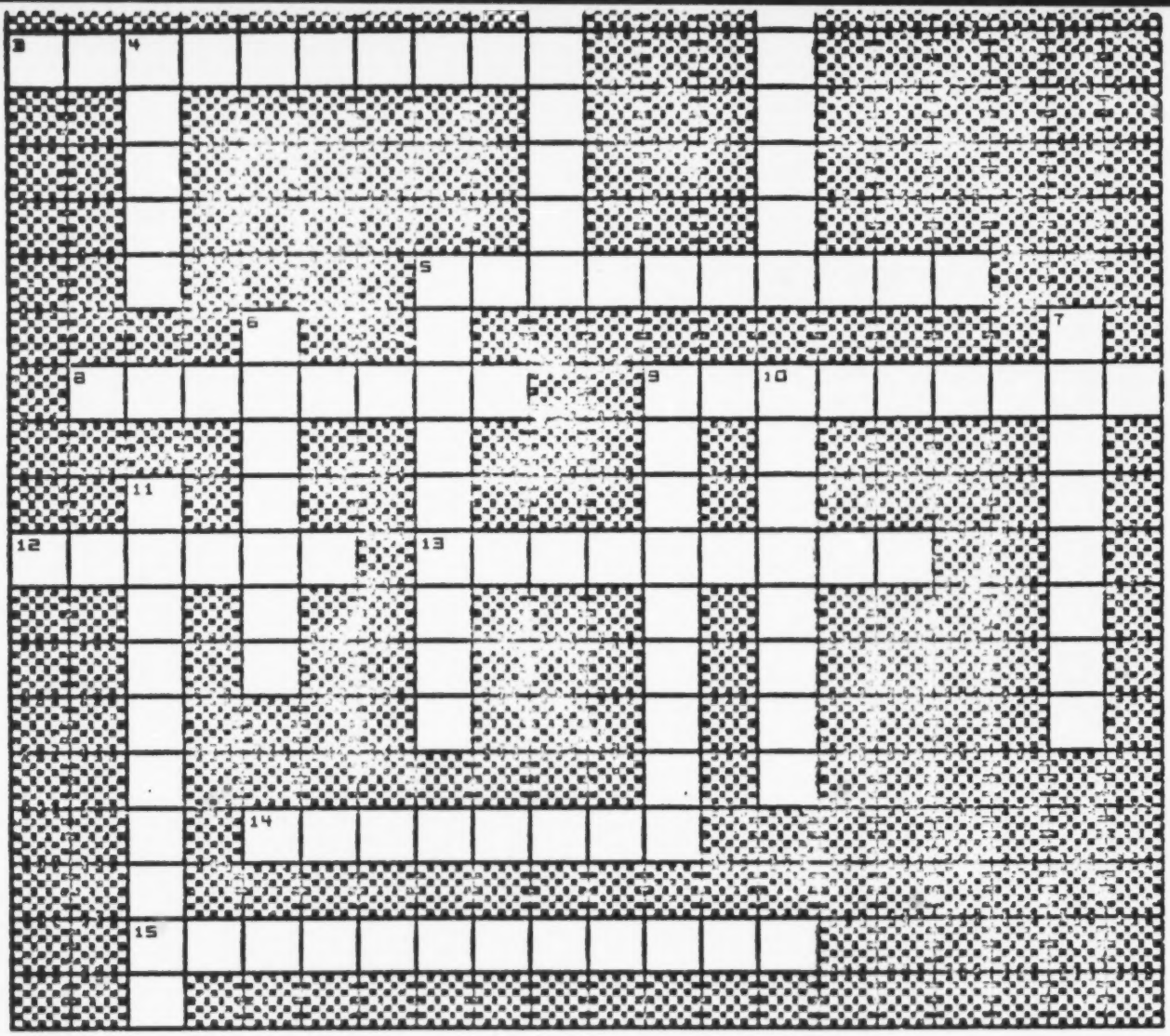
DOWN CLUES

1. dropping down of the baby into the mother's pelvic cavity
2. possible side effect of improper breathing during labor characterized by dizziness
3. tightening of uterine muscles which cause the work of labor to be accomplished
5. high protein substance secreted by the breast during late preg. & 'til milk comes in
7. incision made into perineal muscle at time of birth to give more room for the baby to delive
10. first fetal movements felt by the mother
13. shaping of the baby's head during the birth process
15. top portion of the uterus which is thick and strong

#2

HO-31

LABOR + Delivery



ACROSS CLUES

3. baby's heart beat as heard through the abdominal wall
5. six-week period following delivery
8. drug used to stimulate or induce labor also used to make uterus "clamp down" after delivery
9. sac which contains all products of conception; known as amniotic sac or "bag of waters"
12. stretch marks. pink or purplish in pregnancy, but turn silver post-partum
13. relationship of designated point on fetus to point in mother's pelvis
14. afterbirth; tempory organ inside uterus, all nutrients enter, all fetal excretions exit through it
15. person who will probably deliver your baby

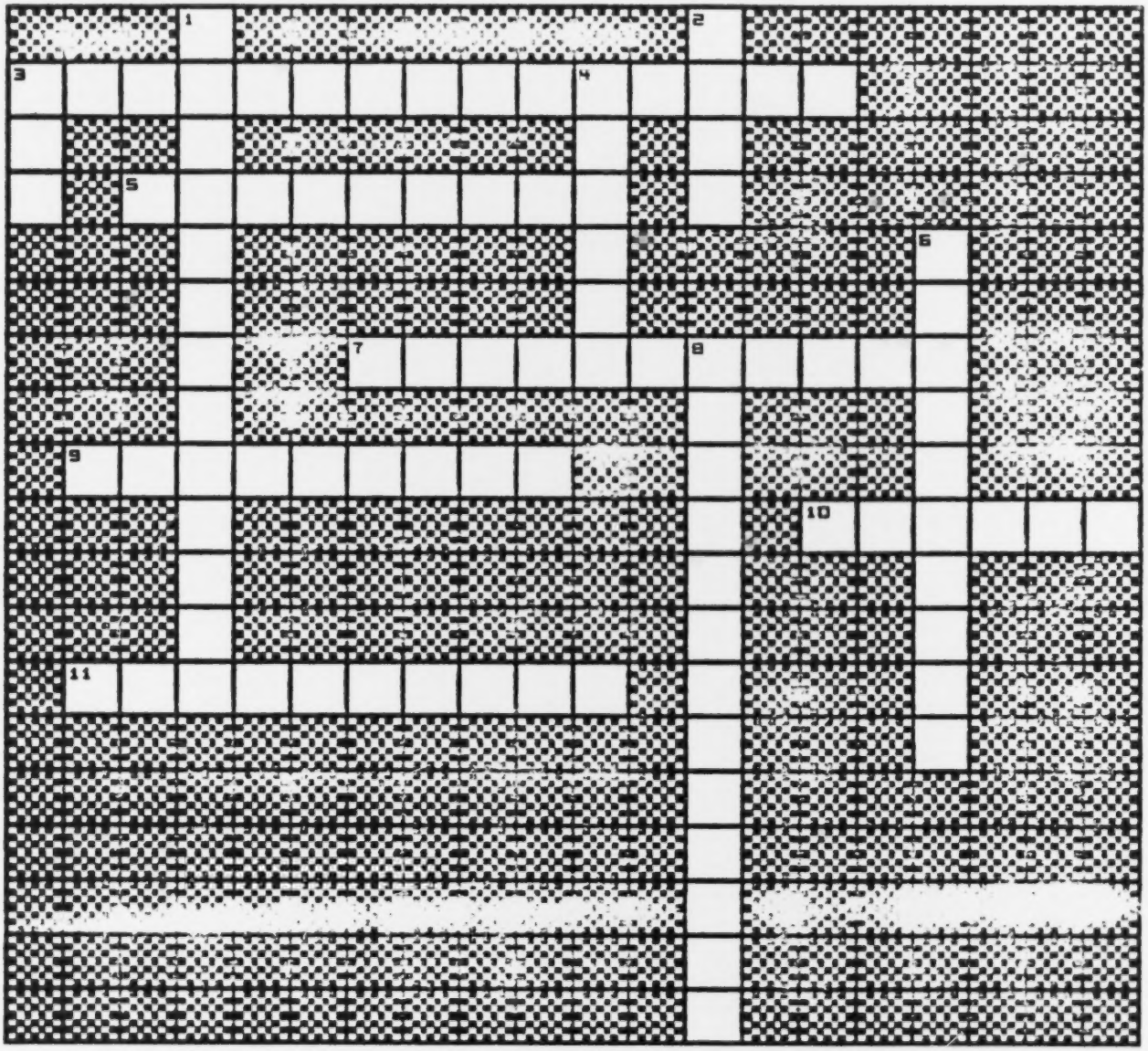
DOWN CLUES

1. muscular organ in which a pregnancy can be grown; womb
2. mom; what you will soon become
4. fetal heart ____, baby's heart as heard through the abdominal wall
5. a woman having her first baby
6. relative position of the presenting part of the fetus to the mother's pelvis
7. body of muscles between the vagina & rectum
9. a woman who has already given birth
10. the baby's first stool; dark green tarry substance
11. the phase of labor about 8-10 cms. which may be the most difficult to cope with

FETALHEART
MEMBRANES
MECONIUM
MOTHER
MULTIPARA
OBSTETRICIAN
OXYTOCIC
PERINEUM
PLACENTA
POSTPARTUM
POSITIONS
PRIMIPARA
STRAIE
STATION
TONES
TRANSITION
UTERUS

HO-8

BIRTH CONTROL



ACROSS CLUES

3. EXPULSION OF THE EMBRYO FROM THE UTERUS
5. MALE STERILIZATION IN WHICH THE VAS DEFERENS ARE CUT AND TIED
7. PROVIDES A CHEMICAL COATING OVER THE MOUTH OF THE UTERUS
9. A THIN, CUP SHAPED DEVICE INSERTED INTO THE VAGINA
10. COVERS THE ERECT PENIS
11. UNION OF EGG AND SPERM

DOWN CLUES

1. THE CUTTING OR TYING OF THE FALLOPIAN TUBES
2. ORAL CONTRACEPTIVE
3. A DEVICE INSERTED INTO THE UTERUS FOR AN INDEFINITE TIME
4. ABSTINENCE FROM INTERCOURSE AT TIME OF OVULATION
6. REFRAIN FROM INTERCOURSE
8. ANOTHER NAME FOR BIRTH CONTROL

September 24, 1986

Dear_____:

Please think carefully about the decisions you are making about your future. It is your future and those of the people around you. I do not know you, but I know your situation. I have been a single parent for the first 6½ years of my son's life. Please read this. It is your life, your parent's life.

How do you feel about yourself? What are your strengths, weaknesses? What do you want to do with your life? How would this affect your life, the life of your parents? What turmoil might this create in your home.

Can you fully expect to take the responsibility of raising a child for the next 18 years? What will happen to this child while you finish your education? Who will care for this child while you maintain a social life? How do your friends feel about your situation? Will they really be there when you need them? Do they understand the changes that will take place in your life? How do you think they will feel, or what do you think will happen when they say "Let's party" or "Let's do something tonight," and you say "No, I have to watch the baby." What would a possible date think of this? How will you feel? Resentment towards the baby, anger towards it? The child is not responsible, you are.

How much control do you think you have over your own life now? How much responsibility do you take in your own life? Do you help with laundry? Pick up your room? Help with the dishes? Prepare meals? Shopping for food?

Can you earn a living? Can you earn a living for two? Who will pay the Doctor bills? Who will see to it that the baby gets the medical attention it needs, when it needs it? How will you get there? How would you get clothes for the baby? Who do you expect to buy the baby's formula? Baby Bed? Accesories that are necessary? Diapers? Who do you expect to change the diapers? Who will clean the dirty diapers, disposables are so expensive.

Do you think your parents should accept the responsibility of your mistake? Is that fair? Haven't they already raised their own family? Why should they raise another child? Don't your parents deserve to have a life of their own?

Your independence will be shattered. You will have to rely on someone else to help provide for your baby. Will the father of this baby help support this baby? For how long? Do you have it in writing, proof that he would continue support, proof that he would support the baby, regardless of the relationship between you? Is he reliable?

It is important that you finish school. How else can you get a quality job that will support yourselves? If you can not motivate yourself now, how can you expect to motivate a child?

Yes, you are capable of giving birth to a child, but are you capable of giving this child life, quality life? Are you selfless enough to make the necessary sacrifice for the benefit of your child? Babies grow fast and need proper fitting clothes often. No new clothes for you. Your time for the baby's sake, there would be very little personal time of your own. The basis for a child's overall development happens during the first 3 years of life. Can you give a child your time, teach it the skills it will need to win in the world? You wouldn't want your baby to just get by, do you? Babies take time — 2AM feedings, bathing, nurturing this child, many hours of the day. Are you ready for this?

You would need to get a job. Who will take care of the baby? Finish school, work to help support yourselves — who will take this responsibility? When will you have time for this baby? Is it fair? If you choose to keep this baby, is it fair to the unborn? Don't you want a child to have all that it needs? Can you say that you can honestly meet all of these responsibilities? Parenting is a full time responsibility, not just whenever you feel like it. It is not fair to your parents if you think it is their responsibility, it is yours.

The pregnancy is the easy part. The child is still within. In this world there would be two of you to care for, no longer just yourself. Can you think and motivate yourself strongly enough for two? If you think you have difficulty now, the difficulties are only just beginning. I know, I have been where you are now and if you choose to keep this baby there is only a rough road ahead. I have survived this situation only because of my great inner strength, strong motivation, prior work experience, and a full college education. I have made many sacrifices of myself only because I did not want my child to suffer from my mistake. Think about it. Can you be strong enough for two?

If you thought you were mature enough to take the actions which caused this pregnancy, then you should be mature enough to deal with it's consequences, which in this case is a difficult decision you must make. What is maturity? Think about it. Can you personally give this child life, not just existence? Life? Quality life?

Be fair to that baby, yourself, your parents. Make your decision not just based on your emotions. Emotions are a tricky thing which may lead us in a wrong direction. We must make the best possible choices, quality choices for all concerned during certain times in our lives. We sometimes must make choices not based on the here-and-now. You must look to the future — for all concerned. Please do not be selfish just because you may want a baby. Think of this child and the life situation it would come into. There are options. Please think clearly and carefully for the benefit of all. I was only lucky.

Please read this again. Think girl!! Please call your counselor. Talk to her, maybe she can help clear your head.

Sincerely,

Someone Who's Been There